

**LEGISLATIVE SERVICES AGENCY
OFFICE OF FISCAL AND MANAGEMENT ANALYSIS**

301 State House
(317) 232-9855

FISCAL IMPACT STATEMENT

LS 7902

BILL NUMBER: HB 1737

DATE PREPARED: Jan 14, 1999

BILL AMENDED:

SUBJECT: Licensure of midwives.

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FUNDS AFFECTED: ☒ **GENERAL**
☒ **DEDICATED**
FEDERAL

IMPACT: State & Local

Summary of Legislation: This bill establishes the Indiana Midwifery Board and sets qualifications for a licensed certified professional midwife (licensed CPM), including completion of the CPM credentialing process as administered by the North American Registry of Midwives. The bill allows for apprenticeship licensing and makes it a Class B misdemeanor to practice midwifery without a license. It also outlines the required elements of informed disclosure that a licensed CPM must provide to a potential client before the midwife accepts the client for midwifery care.

A licensed CPM would be required to have a written collaborative plan of treatment with a licensed physician in order to provide services to at-risk clients. This bill provides that an individual is entitled to give birth in the presence of and receive assistance during the birth process from a midwife. The Office of Medicaid Policy and Planning and the Office of the Secretary of Family and Social Services are directed to adopt rules providing for Medicaid reimbursement for licensed CPMs. In addition, the Indiana Midwifery Board and the Department of Insurance must adopt rules providing for insurance and third party payor reimbursement for licensed CPMs. The bill also makes conforming amendments.

Effective Date: July 1, 1999.

Explanation of State Expenditures: Under current law, only midwives who are also registered nurses may practice midwifery (after obtaining a limited license from the State Board of Nursing). Any other person practicing midwifery commits a Class D felony. This bill revokes that provision and creates three categories of midwives; certified nurse midwives, licensed midwife apprentices, and licensed CPMs. The Health Professions Bureau reports that there are presently between 70 and 80 registered nurses with midwifery licenses. These individuals would be called certified nurse midwives under this proposal and would remain under the jurisdiction of the Board of Nursing, not the Indiana Midwifery Board created by this bill.

The bill establishes the seven-member Indiana Midwifery Board and provides for the licensure of midwife

apprentices and CPMs. The Board is responsible for overseeing the licensing process, establishing fees and continuing education requirements, supervising the peer review process, and preparing consent and other relevant forms. The estimated annual cost of travel and per diem for Board members for meetings is \$15,000. Other costs for postage, printing, telephone, and supplies are approximately \$5,500 annually. The total estimated annual cost for the Board is \$20,500. The Health Professions Bureau will provide staff to the Board and any costs associated with these duties can be absorbed given its existing budget.

There will be additional costs for rule making to the Office of the Secretary of Family and Social Services, the Office of Medicaid Policy and Planning, and the Department of Insurance. These agencies should be able to absorb the costs associated with this bill given their current resources and appropriations.

Explanation of State Revenues: The Board establishes fees for the examination and licensure of midwives. Presumably, fees will be set at a level designed to cover expenses. The amount of revenue that will be generated by this proposal is indeterminable but will depend on the number of CPMs or midwife apprentices who seek licensure. The Board may also impose fines of up to \$500 upon a person licensed under this article who violates certain provisions of this proposal.

The intentional practice of midwifery without a license constitutes a Class B misdemeanor. If additional court cases occur and fines are collected, revenue to both the Common School Fund and the State General Fund could increase. The maximum fine for a Class B misdemeanor is \$1,000. Criminal fines are deposited in the Common School Fund. If the case is filed in a circuit, superior, county or municipal court (courts of record), 70% of the \$120 court fee that is assessed and collected when a guilty verdict is entered would be deposited in the State General Fund. If the case is filed in a city or town court, 55% of the fee would be deposited in the State General Fund.

Explanation of Local Expenditures: A Class B misdemeanor is punishable by up to 180 days in jail. The average daily cost to incarcerate a prisoner in a county jail is approximately \$44.

Explanation of Local Revenues: If additional court actions occur and a guilty verdict is entered, local governments would receive revenue from the following sources: (1) The county general fund would receive 27% of the \$120 court fee that is assessed in a court of record. Cities and towns maintaining a law enforcement agency that prosecutes at least 50% of its ordinance violations in a court of record may receive 3% of court fees. If the case is filed in a city or town court, 20% of the court fee would be deposited in the county general fund and 25% would be deposited in the city or town general fund. (2) A \$3 fee would be assessed, and if collected would be deposited into the county law enforcement continuing education fund. (3) A \$2 jury fee is assessed, and if collected, would be deposited into the county user fee fund to supplement the compensation of jury members.

State Agencies Affected: Health Professions Bureau, Office of the Secretary of Family and Social Services, Office of Medicaid Policy and Planning, and the Department of Insurance.

Local Agencies Affected: Trial courts, local law enforcement agencies.

Information Sources: Gina Voorhies, Board Director, Indiana Board of Nursing, Health Professions Bureau, (317) 233-4405.